

FILED
6-27-2008
JUN 27 2008 YM

MMW

IN THE UNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION

MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT

William L. Sinde, Plaintiff, Pro Se

Court No. 08 C2743

V

City of Zion, Illinois, et al, Defendant

Judge Zagel
Magistrate Keys

PLANTIFF MOTION FOR COURT

Reconsideration/Reinstatement of Defendant State of Illinois Circuit Court 19th Judicial Circuit. Clerks docket entry, Tuesday, June 10, 2008: MINUTE entry before The Honorable James B. Zagel:

Motion to dismiss Defendant State of Illinois Circuit Court 19th Judicial Circuit (11) is granted. State of Illinois Circuit Court 19th Judicial Circuit terminated.

I. Plaintiff objects:

- a. To dismissal of defendant pursuant to Rule 12 (b) (1) and (6) of Federal Rules of Civil Procedure. Description of claim is supported by evidence included with filed complaint, are sufficient grounds for claim. Shows plaintiffs right to relief. Two (2) 19th Judicial Circuit Court Judges, violated plaintiffs U. S. C. XIV amendment rights, i.e. No State shall make --- nor deny to any person within it's jurisdiction the equal protection of the laws. Both Judges are employees of the 19th Judicial Circuit Court. "In The People of The State of Illinois vs William L. Sinde, The People are person's, I'm one of the people and a person, a citizen of U.S.A."
- b. Dismissal because Plaintiffs claims are barred by U.S.C. XI amendment, absent consent of The State a suit against The State, agencies, departments are prohibited - etc. U.S.C. XIV amendment overrides i.e No State shall make or enforce any law, which shall abridge the privileges or immunities of citizens of The United States, nor shall any State deprive any person - nor deny to any person within its jurisdiction the equal protection of the laws.

WHEREFORE; Plaintiff respectfully request this Honorable Court reinstate as Defendant State of Illinois Circuit Court 19th Judicial Circuit Court, NO. 08C2743, On U. S. C., Guarantee, Rights. *See attachment, Lake Co. IL, States ATTORNEY, response To Discovery Motion, Prior to 11-27-06, Hearing, 19th J. C. C.,*

Respectfully submitted

William L. Sinde

William L. Sinde, Pro Se

915 18th St

Zion, IL 60099

847-246-4415

Count 1 of 1

STATE OF ILLINOIS)
) SS General No. 06 CM 5874
COUNTY OF LAKE)

DCN#:

IN THE CIRCUIT COURT OF THE NINETEENTH JUDICIAL CIRCUIT
LAKE COUNTY, ILLINOIS

INFORMATION

Now come the PEOPLE OF THE STATE OF ILLINOIS, by MICHAEL J. WALLER STATE'S ATTORNEY OF LAKE COUNTY, ILLINOIS, and hereby charge upon information and belief that:

WILLIAM SINDE DOB: 2/24/39

hereinafter called the defendant(s), did on or about SEPTEMBER 21, 2006, in Lake County, Illinois, commit the offense of:

AGGRAVATED ASSAULT

in violation of 720 ILCS 5/12-2(a)(1), in that the said defendant in committing an assault, in violation of 720 ILCS 5/12-1(a), used a deadly weapon, in that the defendant, without lawful authority, knowingly waived the right of the victim at Victim Sinde thereby placing him in reasonable apprehension of receiving a battery.

MICHAEL J. WALLER
STATE'S ATTORNEY OF LAKE COUNTY

By: _____
Assistant State's Attorney

BEN DILLON, being first duly sworn on oath deposes and says that the foregoing Information is true.

ASSISTANT STATE'S ATTORNEY

Subscribed and sworn to
before me on October 25, 2006

NOTARY PUBLIC

ZION PD

SEX:M RACE:W HT:6'0 WT:195 EYES:BRN HAIR: BRN
SS#: DL#:
ADDRESS: 915 18TH STREET, ZION IL

PERSONAL RECOGNIZANCE BOND

PEOPLE OF THE STATE OF ILLINOIS

vs.

CASE NO.: 06 cm 5874

Sinde, William L 2-24-39
DEFENDANT DATE OF BIRTH

715 18th Zion IL 60099
DEFENDANT'S ADDRESS

OFFENSE(S) CHARGED: Aggravated Assault

AMOUNT OF BAIL \$

The above named defendant agrees that he/she will:

1. Appear on October 26, 2008 at 9:00 AM C221 of the Lake County Courthouse
Complex or Branch Court 18 N. County
2. That if he/she fails to appear, on any ordered court date, he/she will owe the State the full amount of bail.
3. Abide and follow all Court orders including Orders of Protection and not violate any laws.
4. Give immediate written notice of change of address to the Clerk of the Circuit Court.
5. Not leave the State without prior Court permission.

☐ Report to the Pretrial Bond Supervision Unit of the Lake County Adult Probation Department, 20 South County Street, Waukegan, Illinois, and follow all their rules and conditions, and the following additional conditions:

- ☒ Not have contact or communication with Victor Sinde or be in the premises of
_____ for ☒ 72 hours or ☐ until further order of court.
- ☐ No violent or harassing contact with _____ until further order of Court.
- ☐ Not possess or consume any alcohol or controlled substances.
- ☐ Submit to random testing and pay for tests. Cost not to exceed \$5.00 per test or \$6.00 per Instant Stick test.
- ☐ Abide by a curfew covering: _____
- ☐ No contact with children under 18 years of age. OR ☐ Contact supervised by: _____
- ☐ Refrain from possessing a firearm or other dangerous weapon.
- ☐ Pre-trial bond service fee \$75.00
- ☐ Other _____

CERTIFICATE OF DEFENDANT

I the undersigned Defendant, have read, understand and accept the above stated terms and conditions and furthermore agree that if I fail to appear I will waive my right to confront witnesses and trial can proceed in my absence and if found guilty, I can be sentenced in my absence, I will forfeit the bail set for me and judgment will enter against me for the above stated amount.

William L Sinde
DEFENDANT

9/20/08
DATE

Signed before me

JUDGE

DATE

White Copy: Court

WITNESS

Yellow Copy: Defendant

DATE

171-116 rev 11/02

**Zion Police Department**

2101 Salem Blvd., Zion, IL. 60099

(847) 872-8000 FAX (847) 746-4088

CASE REPORT NO.

DATE
9/21/06

TIME

113

AM
PM**CRIME AGAINST PERSON CASE REPORT**

NATURE OF OFFENSE Agg. Assault		LOCATION OF OFFENSE 915 18th St Zion IL 60099		DATE & TIME OF OFFENSE 9/21/06 113 <input checked="" type="radio"/> AM <input type="radio"/> PM	
COMPLAINANT NAME Sinde Victor E		ADDRESS OF COMPLAINANT (Street, City, State and ZIP) 915 18th St Zion IL 60099		HOME PHONE (847) 246-4415	
D.O.B. 12/01/69		SEX / RACE M/W		PLACE OF EMPLOYMENT (Street, City, State and ZIP) N/A	
ADULT: <input checked="" type="checkbox"/> JUVENILE: <input type="checkbox"/> VICTIM: <input checked="" type="checkbox"/> OFFENDER: <input type="checkbox"/> WITNESS: <input type="checkbox"/> Can Identify yes <input type="checkbox"/> no <input type="checkbox"/> Arrest Made yes <input checked="" type="checkbox"/> no <input type="checkbox"/>		NAME same as complainant		ADDRESS (Street, City, State and ZIP)	
D.O.B. 12/24/39		AGE 67		SEX / RACE M/W	
PLACE OF EMPLOYMENT (Street, City, State and ZIP) N/A		OCCUPATION N/A		WORK PHONE (847) 246-4415	
HEIGHT 6'00"		WEIGHT 195		HAIR Blu	
EYES Brn		COMP		GANG NAME:	
CLOTHING		TICKET NO. 11938		STATUTE NO. 12-2(a)	
CLASS OF OFFENSE Class A		ALIAS / STREET NAME		RELATIONSHIP TO VICTIM	
ADULT: <input checked="" type="checkbox"/> JUVENILE: <input type="checkbox"/> VICTIM: <input type="checkbox"/> OFFENDER: <input checked="" type="checkbox"/> WITNESS: <input type="checkbox"/> Can Identify yes <input type="checkbox"/> no <input type="checkbox"/> Arrest Made yes <input type="checkbox"/> no <input type="checkbox"/>		NAME Sinde, William		ADDRESS (Street, City, State and ZIP) 915 18th St Zion IL 60099	
D.O.B. 12/24/39		AGE 67		SEX / RACE M/W	
PLACE OF EMPLOYMENT (Street, City, State and ZIP) N/A		OCCUPATION N/A		WORK PHONE (847) 246-4415	
HEIGHT 6'00"		WEIGHT 195		HAIR Blu	
EYES Brn		COMP		GANG NAME:	
CLOTHING		TICKET NO. 11938		STATUTE NO. 12-2(a)	
CLASS OF OFFENSE Class A		ALIAS / STREET NAME		RELATIONSHIP TO VICTIM	
ADULT: <input type="checkbox"/> JUVENILE: <input type="checkbox"/> VICTIM: <input type="checkbox"/> OFFENDER: <input type="checkbox"/> WITNESS: <input type="checkbox"/> Can Identify yes <input type="checkbox"/> no <input type="checkbox"/> Arrest Made yes <input type="checkbox"/> no <input type="checkbox"/>		NAME		ADDRESS (Street, City, State and ZIP)	
D.O.B.		AGE		SEX / RACE	
PLACE OF EMPLOYMENT (Street, City, State and ZIP)		OCCUPATION		WORK PHONE	
HEIGHT		WEIGHT		HAIR	
EYES		COMP		GANG NAME:	
CLOTHING		TICKET NO.		STATUTE NO.	
CLASS OF OFFENSE		ALIAS / STREET NAME		RELATIONSHIP TO VICTIM	
WEAPON INSTRUMENT OR MEANS OF ATTACK Hammer		HOW OFFENDER APPROACHED - ENTRY - DIRECTION		TRANS. TO MEDICAL FACILITY	
WEAPON DISPLAYED <input type="checkbox"/> REVOLVER <input type="checkbox"/> SEMI AUTO PISTOL <input type="checkbox"/> RIFLE <input type="checkbox"/> SHOTGUN <input type="checkbox"/> KNIFE <input checked="" type="checkbox"/> OTHER		CAL OR GAUGE		COLOR <input type="checkbox"/> BLUE <input type="checkbox"/> CHROME <input type="checkbox"/> OTHER	
NATURE OF INJURIES AND LOCATION ON BODY					
EXACT WORDS USED BY OFFENDER unknown				DRUGS OR ALCOHOL INVOLVED:	
OFFENDER'S VEHICLE <input type="checkbox"/> USED BY <input type="checkbox"/> TOWED <input type="checkbox"/> STOLEN		YEAR		MAKE	
MOD. / STYLE		COLOR		LICENSE NO.	
STATE		YEAR		VIN	
NAME OF EVIDENCE TECH.		PHOTOS TAKEN <input type="checkbox"/>		NAME OF DETECTIVE OR I.O. NOTIFIED	
NAME OF CORONER NOTIFIED		PROPERTY TAKEN <input type="checkbox"/> \$		MONEY <input type="checkbox"/> \$	
JEWELRY <input type="checkbox"/> \$		ELECTRONICS <input type="checkbox"/> \$		CLOTHING <input type="checkbox"/> \$	
OTHER <input type="checkbox"/> \$		NONE <input type="checkbox"/>		STATUS (CHECK ONE) <input checked="" type="checkbox"/> CLD <input type="checkbox"/> UNFD <input type="checkbox"/> NOT CLD <input type="checkbox"/> EX	
IS FURTHER POLICE ACTION REQUIRED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		IF CASE IS CLEARED HOW CLEARED? (USE THIS BOX FOR SINGLE CLEAR UP OR FIRST CLEAR UP OF MULTIPLE) <input checked="" type="checkbox"/> ARREST & PROSECUTE <input type="checkbox"/> REPORT REFERRED TO PROSECUTOR <input type="checkbox"/> COMPLAINT REFUSED TO PROSECUTE <input type="checkbox"/> STATION ADJUSTMENT		REPORTING OFFICER [Signature]	
SUPERVISOR APPROVING: [Signature]		BODY NO. 9		DATE: 9/21/06	
ASSIGNED TO <input type="checkbox"/> DETECTIVE BUREAU <input type="checkbox"/> GANG UNIT <input type="checkbox"/> REPORTING OFFICER <input type="checkbox"/> MARCONI UNIT <input type="checkbox"/> PORT TO		FILE <input type="checkbox"/> FILE <input type="checkbox"/> PORT TO		ASSIGNED BY [Signature]	

NON-TRAFFIC COMPLAINT AND NOTICE TO APPEAR

ZION POLICE DEPARTMENT

Court Case Number	Agency Report Number	DCN:
	06-22069	

State of Illinois, County of Lake **NO** **11938**
 City/Village of ZION

IN THE CIRCUIT COURT OF THE 19TH JUDICIAL CIRCUIT LAKE COUNTY, ILLINOIS
 People - State of Illinois ☐ City/Village of ZION Plaintiff
 Municipal Corporation Plaintiff

Name (Last, First, Middle)		Alias	Date of Birth
SNOE, William L		<input type="checkbox"/>	2/24/39
Street Address			
915 18th St			
City	State	Zip Code	
ZION	IL	60099	
Gender	Race	Height	Weight
<input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	W	6'00	195
Social Security Number	Driver's License Number	State	
352287909	553093239055	IL	
SID Number	FBI Number	Phone Number	

THE UNDERSIGNED STATES THAT ON Date 9/24/08 Time 1:13 AM

The Defendant did unlawfully commit the following offense: (Offense Title)

Narration: (Describe Offense)

1st - 2nd defendant in custody in
SSD in custody of sect. 12-11
John Snider (Chapter 72 of the Illinois Compiled
Statutes - Criminal) gave a warrant to
John E. Snider to help place Victor
Snider in custody of the sheriff's
receiving a warrant

In Violation of	Chapter	Act	Sec
<input checked="" type="checkbox"/> ILCS <input type="checkbox"/> Local Ordinance	770	5	12-2(1)(1)
Location of Offense:			
915 18th St Zion, IL 60099			
Location of Court:			Room
Court Date:			
Time: AM PM			
You Must Appear in Court on the date and time indicated.			
<input type="checkbox"/> Notice To Appear	<input type="checkbox"/> Full <input type="checkbox"/> 10% Cash Bond Taken	<input type="checkbox"/> Personal Recognizance Bond	
Notice: The Court may issue a warrant for the arrest of any Defendant who has failed to appear and enforce an arrest ticket duly served upon him and upon which a complaint has been filed.			

Under Penalties as provided by law for false certification pursuant to 235 ILCS 5/1-105 of the Code of Civil Procedure and Perjury, the undersigned certifies that the statements set forth in this document are true and correct.

Signature of Complainant

9/24/08



FIELD CASE REPORT



ZION POLICE DEPARTMENT 2101 Salem Blvd., Zion, IL. 60099 (847) 872-8000 fax (847) 746-4088

Case: 06-22069

Nature of Incident: Agg. Assault

Location: 915 18th St Zion IL 60099

Date: 09/21/06

Time: 1:13 AM

Complainant: Sinde, Victor E

D.O.B: 12/01/69 **Sex:** Male **Race:** White

Home Address: 915 18th St Zion IL 60099

Home Phone: 847-246-4415

Cell Phone: 224-717-1584

Reporting Officer: K. Totten #9

Narrative: On the above date and time I was dispatched to 915 18th St Zion IL in reference to a subject being threatened with a hammer. Upon my arrival dispatched advised that according to the caller/complainant we can enter the house using the backdoor. Ofc Thornton and myself located a highly intoxicated and verbally combative subject in the living room of the house. The subject was later identified as:

Sinde, William L

M/W 02/24/39

915 18th St Zion IL 60099

847-246-4415

When Ofc Zaloudek arrived on the scene he spoke with the complainant in the basement and advised that there will be a signed complaint against William. Prior to taking William into custody Ofc Thornton observed a firearm in the waistband of William pants. Ofc Thornton and myself used physical restraint to prevent William from reaching for the weapon. William was secured in handcuffs (double

____ Records ____ File
 ____ Detective Bureau
 ____ Reporting Officer
 ____ Prosecution ____ Follow-up

Reporting Officer: K. Totten

Supervisor: [Signature]

Date 9/21/2006

Page 1 of 2

locked). The weapon found in the waistband was loaded with 5 rounds of ammunition. Another firearm was located in the bedroom on the nightstand. The firearms were identified as:

1-Smith and Wesson .357 Mag Revolver (Found in Waistband)

Serial # X8461

1-Beratta .22 Caliber Semi automatic Pistol (Found in bedroom)


Serial # BCS 43128U

Both weapons will be held to after the court date for the current charges. William does possess a valid FOID card (FOID # 51280054). The hammer was located in the bedroom of the house and will be entered into the BEAST as evidence along with the firearms. William was charged with the following:

NT 11938 720 ILCS 5/12-2(a)(1) Aggravated Assault Cl A

And will be held for bond court due to not being able to post bond. See Ofc Zaloudek's supplemental report for the victim's oral and written statement. There is no further information at this time.

___ Records ___ File
___ Detective Bureau
___ Reporting Officer
___ Prosecution ___ Follow-up

Reporting Officer: 

Supervisor: 

Date 9/21/2006

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SUPPLEMENT



ZION POLICE DEPARTMENT 2101 Salem Blvd., Zion, IL 60099 (847) 872-8000 fax (847) 746-4088

Case #: 06-22069

Nature of Incident: Aggravated Assault

Location: 915 18th St., Zion IL 60099

Date: 09/21/06

Time: 01:13 a.m.

Reporting Officer: Derek Zaloudek #8

NOT advised of Chrg until 3-4am! CK. Time printed/mugged?

Narrative: On 9/21/06 at 1:13 a.m., I responded to 915 18th St. to assist officers Totten #9 and Thornton #45 on a call for service regarding domestic violence between two subjects, later identified as:

Sinde, Victor E.
M/W 12/1/69

VICTIM

William L.
M/W 2/24/39

OFFENDER

As I entered the residence through the south door, Totten and Thornton were both verbally engaged with William in the kitchen area. I walked downstairs to the basement area to speak to Victor, as dispatch advised he was barricaded in the basement for safety. According to Victor, William was drinking heavily for most of the late evening on 9/20/06. (William became verbally abusive towards Victor while the two were sitting in the kitchen, specifically making threats to do bodily harm to Victor by use of a hammer. Fearing bodily harm, Victor went to the basement of the residence and secured the basement door by propping a few 2x4 boards against the door.) Moments later, William broke the door away from the door frame utilizing the same hammer he previously threatened Victor with and pushed his way through the doorway. William then approached Victor and waved the hammer at him as though he was going to strike him. Victor said that William then told him he was "going to smash my head in." I asked Victor if he wished to press charges against William for the incident, and he said that he did. Victor signed a non-traffic citation form to be used in William's arrest. I also asked Victor if he would be willing to provide a written statement regarding the incident, and he agreed (see attached copies.)

For further information, see the original field case report filed by Totten.

☐ Records ☐ File

Reporting Officer

#8

☐ Detective Bureau

☐ Reporting Officer

☐ Prosecution

☐ Follow-up

Supervisor

Date 09/21/06

Page 1 of 1



ZION POLICE DEPARTMENT 2101 Salem Blvd., Zion, IL. 60099 (847) 872-8000 fax (847) 746-4088

Incident Case Number : 06-22069

Date : 9/21/06 Time : 1:13AM Location : 915 18th St Zion IL

I, Victor E. Sinde of 915 18th Street
Print Name Print Address

Date of Birth : 12-01-69 make this statement of my own free will, and it is the truth to the best of my knowledge. I have not been promised anything or threatened in any way. I have been advised that anything I say or write may be used in court in the event of a trial.

After drinking Heavily William Sinde began
Abusing Me threatening To Harm
me. I secured the door to my basement
Living area with 2x4's and screws. William
then smashed Through the door with a
hammer, tore down the 2x4's and waved
the hammer at me threatening To smash
my head in.

Victor Sinde
 Signature of person giving statement

[Signature] #8
 Signature of Witness